•	Copy		
FOR INSTRUCTIONS, SEE BACK OF FORM	, ,		
CHECK ONE:		FORM	STATEMENT
☐ This is an initial* Statement of Organization	MECHICAL STATE	DR-1	OF STATEMENT
বু This is an amended* Statement of Organization		(REV. 07/2004)	ORGANIZATION
*An initial Statement of Organization must be filed within 40 desire of finites	-7000000 CE AM 0.50	For Office Use (Only
*An initial Statement of Organization must be filed within 10 days of the commaking expenditures, or incurring indebtedness exceeding \$750. Amendment of Change. Penalties may be imposed for late filed States.		Comm. #	
a change. Penalties may be imposed for late-filed Statements of Organization.		Indexed	
		Computer	
COMMITTEE NAME ↓↓			
Vinton-Shellsburg Kids First Con	mmettee changes	lto: Unit	e for Kida
MPORTANT: Indicate type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) S	Charles D. C. (C.)		
(5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision PAC (11) Local Board	Statewide PAC (3)State Party (4 olitical Subdivision Candidate (8)County Central Co.	mmittee
COMMITTEE TREASURER (mandatory for all committees)	ot 188ue		1
Name & Darlys Hulme	COMMITTEE CHAIR (manda Name ↓ ↓	atory except for a co	andidate's committee)
Mailing Address \$ \$\display \ \mathcal{O}.O. Box 1/2	Mailing Address ↓ ↓ 63 =	n yuru	dt
City, State ↓ ↓ . Zip Code ↓ ↓	<i>33</i> 3	38 24 On	r. dr.
Vinton, Joura 52349	City, State Visiton,		52349
Phone (3/9) 472-2373	Phone (3/9) 472 - a	<u> 1577</u>	
e-Mail banke fsb-Vinton. Com INDICATE PURPOSE OF COMMITTEE - Check One Pay	e-Mail		
INDICATE PURPOSE OF COMMITTEE - Check One Box Advocate for/against candidate(s) Advocate for/against ballot issue(s) Comment or description: Vintan - shellsburg school band issue			
All Candidates Enter:	1/in	etan). She	Plaking .
Office Sought:	— District: Corr.	nonunity	school Disteri
Political Party (if applicable)	Voor Standing fo		2004
County/Local Candidates and Local Ballot/Franchise Committees Enter:	•		
County: <u>Benton</u>	Date of Election:	acrown	15,2004
Bank Account Name ↓ ↓	Andres or F	- 11 (DACa	
Unite for Kido	Candidate name & Address or Pa	arent Entity (PACs, it	(applicable),
Check, na	1		
Name of Financial Institution/type of Account	Mailing Address ↓ ↓		
Farmers Saving Bank + Irud			
Mailing Address + + O O.O. Boy // 2	City ↓ ↓	State ↓ ↓	Zip ↓ ↓
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
Vinton Sowa 52349	Phone ()		
	e-Mail		
STATEMENT OF AFFIRMATION: By filling this document the committee affirm	ns the following:		
	_		
1. The committee and all persons connected with the committee understand that the rules in Chapter 351 of the Iowa Administrative Code.			
2. That lowa Code section 68A.402 and rule 351—4.9 require the filing of disclosurs subjects the candidate or chairperson (in the case of committees other than a candi imposition of other criminal and civil sanctions.	re reports and that the failure to file the lidate's committee) to the automatic ass	ese reports on or before sessment of a civil pena	e the required due dates alty and the possible
 That lowa Code section 68A.402 and rule 351—4.9 require the filing of disclosure subjects the candidate or chairperson (in the case of committees other than a candidate imposition of other criminal and civil sanctions. That lowa Code section 68A.405 and rules 351—4.38 through 4.43 require the properties of th	re reports and that the failure to file the lidate's committee) to the automatic ass placement of the words "paid for by" and	ese reports on or before sessment of a civil pena and the name of the comi	e the required due dates alty and the possible mittee on all political
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